PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

10 782 280

TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS minus 20			CLAIMS A	S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN		
TOTAL CHARGEABLE CLAIMS	TOTAL CLAIMS			11		Ultili Zi	ŗ			, OR 7 1			
TOTAL CHARGEABLE CLAIMS				 			ŀ		 	4		 	
MULTIPLE DEPENDENT CLAIMS	FOR			NUMBER	FILED NUM	BER EXTRA	E	BASIC FEE	385.00	OR	BASIC FEE	770.00	
INDEPENDENT CLAIMS	TOTAL CHARGEABLE CLAIMS			// minus 20= * (<i>p</i>		XS 9=		OR	X\$18=	86	
TOTAL OR -290				L. Q				X43=		OR	X86=		
CLAIMS AS AMENDED - PART	MULTIPLE DEPENDENT CLAIM PR				,			+145=	·	OR	- 290=		
CLAIMS AS AMENDED - PART II	* If the difference in column 1 is			less than ze	less than zero, enter "0" in column 2			TOTAL		OR	TOTAL	KT2	
Column 1 Column 2 Column 3 SMALL ENTITY OR SMALL ENTITY		· C	LAIMS AS A	MENDEC	MENDED - PART II			1] ~	,	THAN	
REMAINING			(Column 1)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			SMALL E	ENTITY	OR			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	ENT A		REMAINING AFTER		NUMBER PREVIOUSLY			RATE	TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	NON	· ·	*		##	=		XS 9=		OR	X\$18=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	4ME							X43=			X86=		
Column 1)	L	FIRST PRESE	NTATION OF ML	JETIPLE DEP	'ENDENT CLAIM					1	222		
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR FEE							L			OR			
Column 1) Column 2) Column 3 Column 3 Column 3 Fighest Previously Paid For Number Previously Paid For				• •					1	OR .			
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT EXTRA Total Minus FEE							AU	JUII. FEE L		1 ,	NUUII. FEEL		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=				 		(Column 3)	AU	DUIT. FEE E			ADDII. FEET		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=	ENT B		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT	Г	T	TIONAL	. [I	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=	NOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2. write "0" in column 3. ITOTAL ADDIT FEE OR ADDIT FEE ADDIT FEE OR AD	AMENDMENT B	Ingependent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE X\$ 9=	TIONAL FEE	OR	RATE X\$18=	TIONAL	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2. write "0" in column 3. If the entry in column 1 is less than the entry in column 2. write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" ADDIT FEE ADDIT	AMENDMENT B	Ingependent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	. ;	RATE XS 9= X43=	TIONAL FEE	OR	RATE X\$18= X86=	TIONAL	
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CLAIMS REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM If the entry in column 1 is less than the entry in column 2. write "0" in column 3. If the entry in column 1 is less than the entry in column 2. write "0" in column 3. Total Total ADDI- TIONAL FEE X\$ 9= OR X\$18= OR X86= +145= OR TOTAL OR TOTAL OR TOTAL	AMENDMENT B	Ingependent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	7	RATE XS 9= X43= +145= TOTAL	TIONAL FEE	OR OR	RATE X\$18= X86= +290= TOTAL	TIONAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** TOTAL ** TOTAL	AMENDMENT B	Ingependent	CLAIMS REMAINING AFTER AMENDMENT * * NTATION OF MU (Column 1)	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	7	RATE XS 9= X43= +145= TOTAL	TIONAL FEE	OR OR	RATE X\$18= X86= +290= TOTAL	TIONAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** TOTAL ** TOTAL	o	Incependent FIRST PRESEN	CLAIMS REMAINING AFTER AMENDMENT * NTATION OF MU (Column 1) CLAIMS REMAINING AFTER	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR *** *** *** *** *** *** ***	PRESENT EXTRA = = (Column 3) PRESENT	ADI	RATE XS 9= X43= +145= TOTAL DIT. FEE	ADDI-	OR OR	X\$18= X86= +290= TOTAL DDIT FEE	ADDI- TIONAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** TOTAL ** TOTAL	o	Incependent FIRST PRESEN	CLAIMS REMAINING AFTER AMENDMENT * * * * * * * * * * * * *	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR *** ENDENT CLAIM (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA = (Column 3) PRESENT EXTRA	ADI	RATE XS 9= X43= +145= TOTAL DIT. FEE RATE T	ADDI- FEE FEE	OR OR OR	RATE X\$18= X86= +290= TOTAL DDIT FEE	ADDI- TIONAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** OR	MENDMENT C	Incependent FIRST PRESENT Total Independent	CLAIMS REMAINING AFTER AMENDMENT * NTATION OF MU (Column 1) CLAIMS REMAINING AFTER AMENDMENT *	Minus JLTIPLE DEP	HIGHEST NUMBER PREVIOUSLY PAID FOR *** ENDENT CLAIM (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR ***	PRESENT EXTRA = (Column 3) PRESENT EXTRA	ADI	RATE X\$ 9= X43= +145= TOTAL DIT. FEE RATE T X\$ 9=	ADDI- FEE	OR OR	RATE X\$18= X86= +290= TOTAL DDIT FEE RATE X\$18=	TIONAL FEE	
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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1	AMENDMENT C	Incependent FIRST PRESENT Total Independent FIRST PRESENT	CLAIMS REMAINING AFTER AMENDMENT * * * * * * * * * * * * *	Minus Minus Minus Minus LTIPLE DEPE	HIGHEST NUMBER PREVIOUSLY PAID FOR *** ENDENT CLAIM (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR *** ENDENT CLAIM	PRESENT EXTRA = (Column 3) PRESENT EXTRA = =	ADI X	RATE X\$ 9= X43= +145= TOTAL DIT. FEE RATE 7 X\$ 9= X43= 145=	ADDI- FEE	OR OR OR	X\$18= X86= +290= TOTAL DDIT FEE RATE X\$18= X86=	TIONAL FEE	